

**STATE OF SOUTH DAKOTA**  
**Statement of Legal Newspaper Ownership and Circulation**

1. TITLE OF NEWSPAPER		Madison Daily Leader	
2. DATE		10/01/2024	
3. FREQUENCY OF ISSUE	Tuesday & Friday	3A. NO. OF ISSUES PUBLISHED ANNUALLY	104
3B. ANNUAL SUBSCRIPTION PRICE	\$ 190.80		
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)			
PO Box 348, Madison, Lake County, SD 57402-0348			
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)			
PO Box 348, Madison, Lake County, SD 57402-0348			
6. FULL NAME OF PUBLISHER: Ken Harty			
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)			
FULL NAME		COMPLETE MAILING ADDRESS	
Wick Communications		333 W. Wilcox Dr. ste 320, Sierra Vista AZ 85	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.)			
NONE			
9. EXTENT AND NATURE OF CIRCULATION		AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)		1355	1189
B. PAID AND/OR REQUESTED CIRCULATION			
1. Sales through dealers and carriers, street vendors, and counter sales.		113	106
2. Mail Subscription (Paid and or requested)		970	950
3. Paid Electronic Copies		171	253
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)		1254	1309
D. FREE DISTRIBUTION			
1. BY MAIL, CARRIER OR OTHER MEANS		47	12
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)		1301	1321
F. COPIES NOT DISTRIBUTED			
1. Office use, left over, unaccounted, spoiled after printing		5	5
2. Return from News Agents		85	77
G. TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)		1391	1403

**Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public**  
**I swear that the statements made by me are true, correct, and complete:**

*Tom Harry*  
(Signature) 

**State of South Dakota**

County of ~~Hudson~~

(Seal)



Publisher \_\_\_\_\_  
(Title)

(Title)

Sworn to before me this 10 day of Octo 1205, 2024

Maryl Baker  
Notary Pu

Notary Public

My commission expires: 2-19-27